



# Iowa Department of Human Services

Terry E. Branstad  
Governor

Kim Reynolds  
Lt. Governor

Charles M. Palmer  
Director

10/27/14

Robin Fox  
606 Wiley Dr. NW.  
Cedar Rapids IA 52405

Dear Robin,

This letter is in regards to the compliance check of your Level B, Registered Child Development Home completed on 10/23 14. Iowa Code Chapter 237A and 441 Iowa Administrative Code, Chapter 110, describes specific requirements that must be met by a Registered Child Development Home. The following areas were out of compliance at the time of my visit:

- ☐ 110.5(1)j Emergency and disaster plans for fire and tornado are written and posted by primary and secondary exits. **Need at your primary and secondary exits.**
  - ☐ 110.5(1)o Nonsmoking signs posted at every entrance of the home and in every vehicle used to transport children. Signs include telephone # for reporting complaints, and [www.iowasmokefreeair.gov](http://www.iowasmokefreeair.gov). **Need on all doors. Is working with Jill from child care resource and referral to send her some.**
  - ☐ 110.5(1)q All dogs and cats have annual examinations. Records of the exams are on file and must verify that routine immunizations are current and animal is free of endo and ecto parasites. **Provider states the dog is going to the vet the next day and they will be picking it up when they're at the vet's office.**
  - ☐ 110.5(2) A provider file is maintained and contains:
    - ☐ 110.5(2)b Certificates or training verification documentation for:
      - ☐ 110.5(2)b Certification by an approved trainer/organization in infant and child first-aid that includes mouth-to-mouth resuscitation. Certification will be maintained throughout period of registration. If they are unable to locate first aid training that includes mouth-to-mouth resuscitation, they must complete both a first aid course and CPR. **First aid expired - need an update. Provider has a scheduled for November 1, 2014.**
- For assistance in finding training call CCRR at 866-324-3236 x 1410**  
**Most hospitals and fire departments also offer this training. You may call them directly to find a training session.**  
**In addition the American Heart Association and Red Cross also offer this training.**
- ☐ 110.5(2)b During the first year of registration – 12 hours of approved training. At least six hours shall be in a group setting. Two of the twelve hours must be health and safety training. A specific training shall not be used to meet requirements more than one time every five years. **Has only 6 hours for last year.**
- ☐ 110.5(2)d An individual file is maintained for each substitute and contains: : **provider states she has been closing but she does still have a substitute on record. Jan is her substitute on paper. Need for Jan if you still want her as a sub on record.**

☐ 110.5(2)d A completed DHS Criminal History Record Check, form B, 595-1396.

☐ 110.5(2)d A completed Request for Child Abuse Information, form 470-0643

☐ 110.5(2)d A physician's signed statement of health of at the time of employment and at least every two years thereafter. : **Need for Jan and on the new form.**

☐ 110.5(2)d Certification in infant and child first aid that includes mouth-to-mouth resuscitation. If they are unable to locate first aid training that includes mouth-to-mouth resuscitation, they must complete both a first aid course and CPR. **Jan's CPR expires this month 10 of 14. If you wish to continue having her as a substitute on record you must obtain current CPR training.**

**For assistance in finding training call CCRR at 866-324-3236 x 1410**

**Most hospitals and fire departments also offer this training. You may call them directly to find a training session. In addition the American Heart Association and Red Cross also offer this training.**

☐ 110.5(4) The certificate of registration is displayed in a conspicuous place. : **Need to place it somewhere where families and other people entering your home can see a registered provider.**

☐ 110.5(8) Children's Files

The children's files must be **updated annually with the emergency medical authorization completed yearly.** If the parent wants to review, edit and resign and date the intake and emergency medical authorization instead of completing a new form that is ok. I suggest you pick a date, such as the first of the year, beginning of school, your birthday or anniversary, Valentine's Day, ect. On that date I suggest you double check for a current physical form and immunizations (if there were any updates) and have the parents redo or resign the emergency medical and intake information. **4 files needed an annual update and one drop in needs a file.**

☐ 110.5(8)d For infants and preschoolers: An admission physical examination, on the first day of attendance, including past health history, status of present health, allergies and restrictive conditions, and recommendations for continued care when necessary. The date of the exam is not more than 12 months before the child's first day of attendance. **Need for three children: Need for two children initialed ZB and one for KM.**

☐ 110.5(8)e For infants and preschoolers: A statement of health signed by a physician submitted annually. **Need one for KM.**

Non-compliance with any of the mandated regulatory requirements listed above may lead to the cancellation or revocation of your Child Development Home Registration. **Please take whatever steps are necessary to completely address each of the violations noted above. It is essential you correct all above-mentioned violations within the next 45 days.**

☒ Based on the items out of compliance listed above, a recheck or follow up visit to your home is not necessary. However, it is essential you provide documentation to the Department that certifies you have corrected each of the identified regulatory violations and are now in complete compliance with all Departmental regulatory mandates. **Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so,**

**you certify that you have completed all of the mandated regulatory requirements contained within each identified section.**

**Please check mark each of the boxes listed above when the necessary corrections have been completed. By doing so, you certify that you have completed all of the mandated regulatory requirements contained within each identified section.**

**I certify that I have taken all of the steps necessary to correct each of the identified violations noted above and am now in complete compliance with all of the Departmental mandated regulatory rules.**

**Please sign and date below, and return this form in the provided envelope by: 45 days of receipt.**

X \_\_\_\_\_  
Signature Date

Please do not hesitate to contact me at DHS at 319-892-6826 if you have any questions regarding this letter.

Sincerely,

Lisa Wesbrook  
Social Worker II

Irene Holzwarth  
Social Work Supervisor

Always Remember:

Child Care Resource and Referral is an excellent resource for providers to access training options and support in your area. You can reach Child Care Resource and Referral at 866-324-3236.

As you plan your future trainings to meet your 24 hours of training requirement, please remember that you need to use only DHS approved training and only 12 hours can be by self-study. You can access the approved training by going to [http://www.dhs.state.ia.us/Consumers/Child\\_Care/Professional\\_Development.html](http://www.dhs.state.ia.us/Consumers/Child_Care/Professional_Development.html) and you can sign up for training at <https://ccmis.dhs.state.ia.us/trainingregistry/>

All providers need to maintain compliance with rules set out in Iowa Administrative Code, Chapter 110, which includes: 441 IAC 110.5(1): Check with the appropriate authorities to determine how the following local, state, or federal laws apply to you: • Zoning code • Building code • Fire code • Business license • State and federal income tax • Unemployment insurance • Worker's Compensation • Minimum wage and hour requirements • OSHA • Americans with Disabilities Act (ADA).